



CITY OF ATLANTA

SHIRLEY C. FRANKLIN
MAYOR

BUREAU OF BUILDINGS
ARBORIST DIVISION
55 TRINITY AVENUE, S.W., SUITE 3800
ATLANTA, GEORGIA 30303-0309
Tel: 404.330.6874
Fax: 404.658.6977

DEPARTMENT OF PLANNING
AND COMMUNITY
DEVELOPMENT

STEVEN R. COVER, AICP
COMMISSIONER

AINSLEY CALDWELL,
ARBORICULTURAL
MANAGER

APPEAL FORM AND PROCEDURE

REMARKS: ☐ Urgent ☐ For your review ☐ Reply ASAP ☐ Please comment

Please fill out the Tree Commission Public Hearing procedures and appeal form by providing the following information:

- A. Address where trees are being removed,
- B. District number (#),
- C. Council district; and
- D. Neighborhood Planning Unit.

The cost for filing an appeal is a **non-refundable** \$75.00 administrative fee. Checks are to be made payable to 'City of Atlanta'. Remit payment address: Bureau of Buildings-Arborist Div.
c/o Helen Smith
55 Trinity Ave, SW, Suite 3800
Atlanta, GA 30303-0309

You may mail appeal form(s) and written justification to Helen Smith at the address noted above or fax Attn: Helen Smith at 404.658.6977. Upon receipt of documents, your case will be advertised and scheduled for the next Tree Commission Public Hearing date (official property site plan must be available at the Public Hearing). Tree Commission Public Hearings are held every 3rd Wednesday of the month – 6 pm at City Hall, Committee room 2.

Note: The signature page must be notarized.

If there are further questions or concerns, please notify Helen Smith by phone at 404.330.6874 or via email at hsmith@atlantaga.gov. Thank you.

[illegible]

TREE CONSERVATION COMMISSION PUBLIC HEARING ON APPEALS

A quorum of the Tree Conservation Commission will preside over the Public Hearing. Each case will be heard in accordance with the procedures below.

Procedures

All testimony shall be taken under oath.

All persons appearing before the Commission shall state their name and relationship to the case, and shall then state facts and argument relevant to the case.

Each party shall have 5 minutes, unless a request for additional time is made at the beginning of the hearing and granted by the Commission. Each side with several speakers may poll their time up to 5 minutes.

The Clerk will maintain account of the time.

All speakers must fill out a blue “Speaker Sign-In Card”

All exhibits are to be logged in by the Clerk.

The official site plan must be made available to the Tree Commission and verified by the City Arborist and Applicant.

To appeal against a Notice of Preliminary Approval (yellow sign) appellant must be a citizen of Atlanta, owner of property or business in Atlanta, or civic organization in the Neighborhood Planning Unit structure of Atlanta.

Order of Presentation

1. A sounding of the summary of the appeal (Clerk)
2. Appellant submit evidence & official site plan to Clerk (Clerk)
3. Summarization of case (Arborist)
4. Explanation of exhibits (City Attorney)
5. Swear in **all** speakers for case (City Attorney)
6. Opening statement and presentation by appellant (5 minutes)
7. Statements of other parties supporting case (5 minutes)
8. Opening statement and presentation by administrative official from whose decision the appeal arose (5 minutes)
9. Statement and presentation of parties opposing the appeal (5 minutes)
10. Rebuttal by appellant (5 minutes)



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TREE CONSERVATION COMMISSION (COMMISSION)

NOTICE OF APPEAL OF DECISION OF ADMINSTRATIVE OFFICIAL

Date Filed _____ Appeal Number _____

Name of Appellant _____ Phone _____

Address _____

Name of Owner _____ Phone _____

Address _____

DESCRIPTION OF PROPERTY

Address of
Property _____

Land Lot: _____ District: _____ County, GA.

Council District _____ Neighborhood Planning Unit: _____

TO THE COMMISSION: Appellant, having received an adverse decision dated _____, from an administrative official on a matter regulated by the Tree Protection Ordinance of the City of Atlanta, Chapter 158 of Atlanta City Code, 1995, hereby requests that the Commission approve of the subject appeal.

Justification for Request: On a separate sheet(s) of paper, you must submit a full justification for your request based on the criteria outlined in the instructions on page 4. If the owner and appellant is not the same, please complete Attachment 1 If the appellant will be represented by an attorney, please complete Attachment 2.

CITY OF ATLANTA
TREE CONSERVATION COMMISSION
APPEAL INFORMATION

Please provide the information below regarding your appeal case. This information will be read at the Public Hearing, prior to the presentation of your case.

1. What is the specific decision of the City arborist that you are appealing?
2. What decision do you want the Tree Conservation Commission to make?
3. If applicable, please identify, by section number, the relevant section of the City's Tree Protection Ordinance according to which you contend the arborist made an erroneous decision.
4. Briefly summarize the proposed activities on the property.
5. If this is a hardship case, please provide justification, and provide a signed affidavit if you are asking for consideration based on income and assets or nonprofit status. If you have a development impact fee waiver, please provide a copy.
6. Have you obtained the relevant permits for your work (building permit, land disturbance permit, variance permit, etc.)?
7. If applicable, please attach supporting reports or affidavits from licensed professionals (ex: independent arborists, structural engineers, etc.).

NOTICE OF APPEAL OF DECISION OF ADMINISTRATIVE OFFICIAL (continued)

I hereby swear that all statements herein and attached herein are true and correct to the best of my knowledge and belief.

Sworn To And Subscribed Before Me This _____ Day of _____, 200____

Notary Public

Appellant or Agent For Appellant

Attachment 1

14

AUTHORIZATION BY PROPERTY OWNER

(Required only if appellant is not the owner of the property subject to the appeal.)

I, _____(OWNER's NAME)

SWEAR THAT I AM THE OWNER OF THE PROPERTY AT _____
_____(PROPERTY ADDRESS),

AS SHOWN IN THE RECORDS OF _____COUNTY, GEORGIA WHICH IS THE
SUBJECT MATTER OF THE ATTACHED APPEAL. I AUTHORIZE THE PERSON
NAMED BELOW TO ACT AS APPELLANT IN THE PURSUIT OF THIS APPEAL.

NAME OF APPELLANT _____

ADDRESS _____

TELEPHONE NUMBER _____

Signature of Owner

Personally Appeared
Before Me

Who Swears That This Information
Contained In This Authorization Is
True and Correct To The Best Of
His or Her Knowledge or Belief.

Notary Public

Date

Note: This form is required only if the appellant is the owner of the subject property, or if someone is acting on behalf of the owner.

Attachment 2

15

AUTHORIZATION OF ATTORNEY

I SWEAR, AS AN ATTORNEY AT LAW, THAT I HAVE BEEN
AUTHORIZED BY THE OWNER TO FILE THE ATTACHED

DATE

SIGNATURE OF ATTORNEY

NAME

MAILING ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE NUMBER